IN THE UNITED STATES DISTRICT COURT

FOR THE WESTERN DISTRICT OF WISCONSIN

GREGORY BOYER, as administrator of the Estate of Christine Boyer, and on his own behalf,

Plaintiff,

vs. Case No. 20-CV-1123-jdp

ADVANCED CORRECTIONAL HEALTHCARE, INC., LISA PISNEY, AMBER FENNIGKOH, STAN HENDRICKSON, DANIELLE WARREN, SHASTA PARKER and MONROE COUNTY, WISCONSIN,

Defendants.

GREGORY BOYER, as Administrator of the Estate of Christine Boyer, and on his own behalf,

Plaintiff,

vs. Case No. 22-CV-723-jdp

USA MEDICAL & PSYCHOLOGICAL STAFFING, NORMAN JOHNSON, TRAVIS SCHAMBER, WESLEY HARMSTON and JILLIAN BRESNAHN,

Defendants.

Deposition of **JEFFREY SCHWANZ**, a witness in the above-entitled action, taken at the instance of the Plaintiff, pursuant to notice of the examination and service of subpoena on **November 3, 2023**, commencing at 12:38 p.m. at 112 South Court Street, Sparta, Wisconsin, pursuant to applicable Wisconsin Statutes, before and reported by Nancy Johnson, Registered Professional Reporter.

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A P P E A R A N C E S

STEPHEN H. WEIL
LOEVY & LOEVY, 311 North Aberdeen Street, 3rd Floor, Chicago, Illinois, 60607, appeared as counsel for and on behalf of Gregory Boyer, as Administrator of the Estate of Christine Boyer and on is own behalf, Plaintiff.

DOUGLAS S. KNOTT
LEIB KNOTT GAYNOR, LLC, 219 North Milwaukee Street, Suite 710, Milwaukee, Wisconsin, 53202, appeared as counsel for and on behalf of Advanced Correctional Healthcare, Inc., Lisa Pisney and Amber Fennigkoh, Defendants.

ANDREW A. JONES
HANSEN REYNOLDS, LLC, 301 North Broadway Street, Suite 400, Milwaukee, Wisconsin, 53202, appeared, as counsel for and on behalf of Stan Hendrickson, Shasta Parker, Danielle Warren and Monroe County, Defendants.

MARK W. HARDY
GERAGHTY, O'LOUGHLIN & KENNEDY, P.A., Wells Fargo Place, 27th Floor, 30 East Seventh Street, St. Paul, Minnesota, 55101, appeared by Zoom as counsel for and on behalf of USA Medical & Psychological Staffing, S.C., Norman Johnson, Tavis Schamber, Wesley Harmston and Jillian Bresnahan, Defendants.

DANIEL KAFKA
LEIB KNOTT GAYNOR, LLC, 219 North Milwaukee Street, Suite 710, Milwaukee, Wisconsin, 53202, appeared by Zoom as counsel for and on behalf of Advanced Correctional Healthcare, Inc., Lisa Pisney and Amber Fennigkoh, Defendants.

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I N D E X

Examination of JEFFREY SCHWANZ

By ATTORNEY WEIL
Examination 4

By ATTORNEY KNOTT
Examination 48

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There were no exhibits marked.

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WHEREUPON,

JEFFREY SCHWANZ,

was duly sworn by the Notary Public and testified under oath as follows:

BY MR. WEIL:

Q So Mr. Schwanz, you and I just met. My name is Steve Weil. I represent the Plaintiff in this case. There are two lawyers here and a few on the screen, and that's why you're on Zoom and here.

A Okay.

Q And live. Have you been deposed before, Mr. Schwanz?

A What's that?

Q Have you been deposed before?

A No.

Q Have you ever testified in Court?

A No.

Q I will go over a few rules. This is -- I'm going to try to make this as normal a conversation as possible. I have some questions. The idea is you provide some answers and we'll try to make it flow smoothly. The one big rule here is we have a court reporter taking down everything you and I say.

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That changes our conversation a little in two specific ways. First, it's normal to talk over each other a little bit. You anticipate my question, I anticipate your answer and we overlap a little. With the court reporter, we can't do that. We have to try to avoid as much as we can, because the court reporter can't take two people talking at the same time.

A Okay.

Q The other rule is, it's common to say uh-huh, uh-uh, nod your head, shake your head, that kind of thing. Hard for the court reporter to take down. So in the place of that, I would ask for a yes or a no and you can go ahead and say whatever you like. But just that those answers are clear so the court reporter can take down something that's sensible for the record. Does that make sense?

A Yes.

Q I am here to get your best recollection, your best estimate. I don't want you to speculate, but I am entitled to what you recall, and if I'm asking you to estimate something, I would ask you to do that. Is that fair?

A Yes.

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Q I will try to be as clear as I possibly can in asking questions and have them make sense. If something doesn't make sense to you, you don't know what I'm talking about, let me know. I will do my best to explain myself. Is that clear?

A Yes.

Q Okay. If you answer a question, I'm going to assume you understand what I'm asking, is that fair?

A Yes.

Q The lawyers may object from time to time. That's just a normal part of these depositions. Unless you're instructed not to answer the question, you're still obligated to answer. Does that make sense?

A Yes.

Q Your lawyer here today is Mr. Jones?

A Correct.

Q What did you do to prepare for this deposition today, Mr. Schwanz?

A Nothing, really. I mean, I was just called by my attorney and he just told me --

MR. JONES: No, no. Don't talk about what you and I discussed.

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MR. WEIL: I'll help him out.

BY MR. WEIL:

Q I'm not interested in the substance of what you talked about with Mr. Jones. That's privileged. But it sounds like you had a conversation with him to prepare for this deposition?

A Yes.

Q Did you review any documents to prepare for the deposition?

A I did not.

Q Did you write a report in this case?

A I believe I did not.

Q You don't remember reviewing anything, even a report that you might have written?

A I do not.

Q You had a conversation with Mr. Jones. Was it on Zoom? On the telephone?

A Telephone.

Q Were you looking at any documents at the time?

A I was not.

Q Any document ever been sent to you? Emailed to you? Anything like that?

A No.

Q How long was your conversation with Mr. Jones?

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Again, I don't want to get into the substance. I just want to know how long it went.

A Half an hour, 40 minutes.

Q When was that?

A Today is Friday. I believe it was Tuesday.

Q I want to go over the very brief and high level of your employment history. I don't want details. Just kind of from high school on out with some rough dates. Can be estimates, that's fine. Just kind of what you did with your career?

A Okay. Served during the Vietnam War. Honorable discharge. 1977, 1977 I started at the Veterans Hospital in Tomah, Wisconsin. Worked there for 40 years on the psychiatric unit. Retired from there. Took a year off and applied at the Sheriff's office and worked there for a little over eight years until I retired.

Q I'm trying to catch up with you here. So you started at the Sheriff's office in 2018?

A No. It was more like 2016, I believe.

Q You retired from the VA?

A 2014 I retired from the Veterans Hospital.

Q I was doing math in my head. You said you

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started at the VA in '77?
A Yes.
Q You worked there for approximately 40 years. You retired?
A With my service time it was 40 years.
Q Gotcha.
A Yes.
Q So you retired in '14 from the VA. And you were not working for a year?
A Correct.
Q And so in, roughly in 2016 you got a job with the Sheriff's office?
A Yes.
Q Just to go back to your work at the VA hospital. You said you worked in the psych ward?
A Yes.
Q Did you graduate from high school?
A In the service, got my diploma, GED.
Q You went into the service and got a GED?
A Correct.
Q Did you have education after that?
A No.
Q Okay.
A Just my service. Everything I had had to be

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updated.
Q You said you worked in the psych ward at the VA hospital?
A Correct.
Q What was your job there?
A I was a certified nursing assistant, CPR instructor, and I responded to all medical and psych emergencies. I was on the team.
Q The CNA, what sort of training did you go through for that?
A Oh, I believe it was two months of training, blood pressures. It's been a long time. Just things to help take care of the Veterans. Medication reviews and things like that, and, you know, care for the Veterans.
Q What do you mean by medication review?
A Well, just make sure they get their meds on time and, you know, if they need any extra medications, like a shot or something. Being on the psych unit, sometimes we had to assist the nurses in doing that.
Q You wouldn't be deciding which medications anybody needed?
A No, no.
Q Just making sure that the medications

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prescribed got to where they were supposed to go?
A Correct.
Q In terms of giving shots, you would be, not maybe administering the shots, but helping out a nurse --
A Yes.
Q -- to administer them?
A Yes.
Q You said you learned CPR, correct?
A Yes. I taught CPR for 35 years.
Q Blood pressure measuring?
A Yes. Temp, whatever.
Q And you said you started at -- well, let me back up real quick. Referring to the VA hospital, you received periodic training there in those, in the CNA role?
A Yes. Every year, annually.
Q Okay. And that was sort of to re-up your, your education, the medical education that you had?
A Yes.
Q And it sounds like you retired in '14 and then began working at the jail in '16, is that right?
A Yes. I took a year off. I drove bus for the

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County for senior citizens. And then I applied in the jail and they hired me.
Q So you were driving a bus 2014 - 2015?
A Approximately, yes.
Q Then you take on the job at the Monroe County Jail in 2016?
A Approximately, yes.
Q What's your title at the jail when you take that on?
A Just a correction officer.
Q And how long were you at the jail?
A Eight years.
Q So you would have retired -- you've retired since then?
A April.
Q April?
A This year.
Q April of this year. April of '23?
A Yes.
Q Correctional officer the whole time?
A I was promoted to Sergeant, I want to say, beginning of 2022.
Q You left as soon as you got the promotion, more or less?
A Well, it was a whole year.

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Q Got to be boss for a year?
A Yeah. Kind of, I guess.
Q In terms of your work at the jail, were you on a particular shift over that time or did it vary?
A It varied. I worked a lot of 16-hour shifts.
Q This incident, this deposition is about the medical incident with Christine Boyer. And, as I understand it, you were on the night shift for -- during that incident, is that right?
A I believe I came in at ten p.m. that night to work overnight, because they had a call-in, so I came in at ten p.m. to work until six a.m.
Q You were covering for someone?
A Yes.
Q What was your typical shift, do you remember, during that time?
A I do not recall. I believe I was on the day shift, which was six a.m. to six p.m.
Q Did you have a number, a shield number, that you would enter in, say, for Cell Check Logs and whatnot?
A Yes.
Q What was it?
A 1296.

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Q Ninety-six. Do you have any recollection of Christine Boyer?
A Some.
Q Can you tell me about that?
A The incident you're asking, or?
Q Let's back up. Do you have -- if Christine Boyer walked through the door today, would you recognize her?
A I would not.
Q What's your memory of Christine Boyer?
A Really, none. I never had no contact with Christine until the night of the incident.
Q All right. Why don't you describe what you recall about the incident. Well, let's back up. You mentioned that, you talked about the shift that you were on. Do you recall coming in to cover for someone else at ten p.m.?
A I believe so.
Q And how do you remember that? Is it -- did you look at a document to refresh yourself?
A No. I just, if I was there that night, it was probably for coverage.
Q Got it. So you would not normally be there on such a late shift, so that indicates you were covering for someone else? Am I understanding

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right?
A Yes.
Q So, go ahead. How do you remember coming in around ten that night?
A A lot of times I came in at ten to work, ten to two, or on my days off I would come in, cover a shift.
Q The night shift is six to six right? Six p.m. to six a.m.?
A Six p.m. to six a.m., yes.
Q Do you know why you would be getting called in at ten p.m., sort of after the shift is well underway?
A I believe somebody stayed from six p.m. until ten p.m. We could only stay for four hours over your regular shift, so it would have been 16 hours. Somebody went home at ten p.m. and I came in at ten p.m.
Q So the two of you sort of shared that shift?
A Yes.
Q Do you know who that other person was, the person that worked up to ten p.m.?
A I want to say it was Shasta.
Q Why do you think it was Shasta?
A Well, I believe she stayed from six p.m. to ten

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p.m.
Q Okay. From the documents we've gathered in this case, Shasta Parker was, at least for part of the time, in the booking area --
A Correct.
Q -- of the jail. Does that sound right to you, from your recollection?
A I believe so.
Q Do you recall that you were -- where do you remember being that night?
A Housing.
Q And if Shasta was in booking and you replaced her, do you know why you ended up in housing that night?
A I believe Danielle came to booking when I came in at ten.
Q Okay. And so she took over booking and you went into housing?
A I believe so.
Q Okay. Do you have any -- I don't want you, again, I don't want you to speculate. I'm just asking for your best estimate. Is that something you recall, or?
MR. JONES: Okay. Go ahead.
A Not really. I guess.

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Q Let me ask it this way. Let's go to the incident with Ms. Boyer. Do you remember where you were when you first learned that there was a medical emergency with Ms. Boyer?
A Yes. I was in housing.
Q Who were you there with?
A I believe it was Kyle.
Q Kyle Moga?
A Yes.
Q What were your duties in housing, typically?
A Charting, doing our hourly checks. That was basically it.
Q Hourly cell checks where you were walking around and checking on detainees?
A Yes.
Q At ten p.m., they are in their cells at that point, is that right?
A Yes.
Q What do you remember happening after -- how did you learn about the medical event with Ms. Boyer?
A I believe it came over the radio.
Q And did you have a radio on you?
A Yes.
Q And that was a standard thing to have when you're in housing?
A Yes.
Q And what did you -- do you remember, was there a special call sign? Was it just a normal conversational speech, or?
A I don't recall.
Q Were there codes that were used to describe a medical emergency?
A No.
Q What do you remember hearing from Ms. Warren, if anything?
A That there was a medical emergency or she needed somebody in booking.
Q Anything else?
A No.
Q And what did you do when you heard that?
A I immediately went to booking to assist.
Q What did you see there when you got there?
A I seen Warren and Moga, Kyle, doing CPR, trying to get Christine to respond. I started covering the windows in booking. Curtains, we have magnetic curtains. So I wanted to make sure she had her privacy. And everybody performed what they were supposed to perform, CPR, and, you know.

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Q So, go ahead. I'm sorry.
A EMTs were called, you know. AED was applied.
Q You and Mr. Moga are in housing together when the call comes in?
A Yes.
Q It sounds like he got to Ms. Boyer first?
A He did, because I couldn't run that fast because of my age.
Q We all get there, right?
A Right.
Q So Mr. Moga is there first. By the time you get there, he's already administering CPR?
A Yes. They were trying to get Christine to respond.
Q And is that the first time you remember laying eyes on Christine Boyer?
A Yes.
Q Did you have any -- I just spoke with Mr. Moga. Deposed him like I'm deposing you. He had a chance interaction where he, while he was assigned to housing, he had ended up in booking a couple times. Did that happen with you too, or?
A Yeah. If everything was quiet in housing, we would go down and see if anything needed to be done in booking.
Q Do you remember that happening in this case with Ms. Boyer on that shift?
A I don't recall.
Q Well, do you remember anything, again about Ms. Boyer or the situation or any calls to doctors or anything like that before the medical emergency?
MR. JONES: Objection to form. Go ahead and answer.
A No.
Q You said that when you got there, Mr. Moga and others are rendering aid to Ms. Boyer. And you went and put something on the cell windows for the other cells?
A Correct.
Q And you did that to preserve her privacy?
A Yes.
Q Could other detainees see into Ms. Boyer's cell when her emergency was occurring?
A Possibly.
Q And that's why you put the coverings on the windows?
A Yes.
Q Okay. Do you recall any detainees looking out

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onto the scene?
A I do not recall.
Q So you put the coverings on the windows. What do you do after that?
A I just waited for the EMTs to show up, because the rest of the staff was doing what they were supposed to be doing with Christine.
Q So the other folks are helping Christine. Are you involved in that at all?
A No.
Q I'm going to have you take a look. This has been marked before as Exhibit 41.
MR. WEIL: Andrew, do you mind if I use your copy here? That's the universal copy there.
MR. JONES: Yep.
BY MR. WEIL:
Q I'll just have you take a look at that, Mr. Schwanz. Give it a read and then I have some questions for you.
A Okay.
Q Okay. You've read it?
A Yes.
MR. JONES: You can hang onto it until he's done.

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BY MR. WEIL:
Q Do you recall writing this report?
A Yes. Yeah. We always have to write a report on any incident.
Q How was this report written? Literally, is it -- are you in a special form on the computer or are you typing this out on a Word document? How does that work?
A Just a Word document.
Q Microsoft Word document. You're typing this up?
A Yes.
Q And then how does --- what happens when you type it up? What do you do with it?
A My supervisors receive it.
Q Do you email it to your supervisor?
A I did not. I printed off copies and gave it to them.
Q So you've printed off a hard copy and handed it to your supervisor?
A Yes. Yes.
Q Do you know what happens with the report after that?
A I do not know.
Q If this were in a computer system, do you know

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how it would have gotten there if you printed off a hard copy and handed it to somebody?
A No.
Q Do you know if there's any sort of system for storing reports like this in the Monroe County Jail?
A No.
Q This report has a case caption SO-CR192109. Do you see that?
A Yes.
Q Do you know what that refers to?
A I believe that case number goes up to the DA's office or somewheres. I don't know where it goes.
Q What is a case number?
A That would be the report number for the incident.
Q Okay.
A This would be the case number.
Q So does every incident get a case? Is that how it works? A case number?
A Yes.
Q And how do you know which case number to assign it to?
A We have to call dispatch and they give us a

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case number.
Q Dispatch would be the Sheriff's office?
A Yes.
Q Does everybody call dispatch or does one person call and say, okay, for the Boyer incident, here's the number?
A One person.
Q And do you know who at dispatch is on the other end?
A I do not.
Q Do you know how, how it is decided that something is a case versus not?
A No.
Q Did anybody -- did you receive instruction about -- were you told to write a report at some point?
A Yes.
Q Do you remember who told you?
A Probably, I believe it was Danielle.
Q Danielle Warren?
A Yes.
Q Do you remember when she would have told you to write the report?
A Shortly after the incident before I went home that morning.

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Q All right. The incident takes place around, shortly before one a.m. Is that consistent with your recollection?
A I believe so.
Q You can look down here at the report.
A Okay.
Q Does the report accurately -- the report in Exhibit 41, does it accurately reflect what you recall from the incident?
A Pretty much.
Q What would you add or subtract?
A I guess I don't remember running to get the scissors. I guess that would be about it.
Q You mentioned, when we were talking before, we looked at this, that you also put covers on the windows. I don't see that in the report. Do you?
A No. It's not in the report.
Q That's something you would add if you were editing?
A Yep.
Q Any reason to think you didn't run and get the scissors? Or you just don't remember?
A I don't remember.
Q No reason to think that this report is wrong,

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though, right?
A No. It looks right.
Q After the -- well, the EMS arrived at some point, correct?
A Yes.
Q And they took Ms. Boyer out, correct?
A Yes. We put her on the gurney.
Q Do you know what happened to her after that?
A She was going across the street to Mayo hospital.
Q Okay. Do you know what happened after that?
A I do not know.
Q It says in this third from the bottom line of your report, the scene was then secured by jail staff. Do you see that?
A Yes.
Q What does that mean?
A That means we locked down the cell until administrative, which would be Captain Hendrickson, can check the scene out and make sure it would be cleared before we could use the cell again.
Q The next line says, inmate's husband was waiting in the lobby during the incident. Do you see that?

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A Yes.
Q Do you remember how you learned that Mr. Boyer was in the lobby?
A I believe Master Control said that he was out there with some medications for Christine.
Q They told you that?
A I think we all were aware of it, but before we could go out to see him, we had her medical emergency.
Q Are you saying you were aware of that before the medical emergency even occurred?
A I don't recall.
Q Do you remember when Mr. Boyer showed up at the jail?
A I don't recall. I was in housing.
Q And so when did you learn Mr. Boyer was out waiting to provide some medications for Ms. Boyer?
A After we put her in the ambulance.
Q So after the medical emergency, that's when you learned that Mr. Boyer was out in the hallway?
A Yes.
Q Do you know why -- how did you learn he was dropping medications off for Ms. Boyer?
A He had a bag of medications when I went out to

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see him.
Q Did someone -- how were you assigned or how did it come to be that you were the one who went out to see him?
A It shouldn't have been me, but Captain Hendrickson was there and he asked me if I would go out and talk to him, so, he is my Captain, so I told him I would.
Q So you went out to see Mr. Boyer after Captain Hendrickson instructed you to do that?
A Yes.
Q Is that right?
A Yes.
Q Do you know why Captain Hendrickson -- well, you said it shouldn't have been you. Why do you say that?
A Well, usually it's the supervisor that's on duty. At the time I was not a Sergeant. So, you know, I just -- my supervisor told me to and I did what I was ordered to do.
Q Did I understand you correctly to say you think it should have been the supervisor who went out?
A That's usually the practice, yes.
Q Did Captain Hendrickson explain why he was

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asking you to do it instead?
A He went into Master Control to review the videos of the incident, so he was busy.
Q How long after Captain Hendrickson arrived did he instruct you to go out and see Mr. Boyer?
A Right away.
Q Okay. And when did Captain Hendrickson arrive?
A Oh.
Q Let me back up. When did the -- to go out here to look at your report again. Let's say Ms. Boyer is placed on the gurney and taken to the jail hospital. What's your estimate of how long that took from -- when you first learned of the medical emergency to her being wheeled out?
A Not very long at all. The EMT, the ambulance was there pretty fast.
Q And they got her out pretty fast?
A Yes. They started an IV and they got a pulse. We put her on the gurney, took her out in the sally port, loaded her up in the ambulance.
Q Okay.
A So it was quite fast.
Q All right. From the time she gets wheeled out to when Captain Hendrickson arrives, how long

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is that?
A I don't recall.
Q Best estimate. Again --
A Half an hour.
Q Half an hour?
A Thirty minutes.
Q Half an hour to 40 minutes?
A I would say 30 minutes. I'm sure he was called right away.
Q Thirty minutes he arrives. Do you know how Captain Hendrickson learned that Mr. Boyer was out in the hallway?
A I believe whoever was in Master told him.
Q Was there any discussion of telling Mr. Boyer what had happened in the time before Captain Hendrickson arrived?
A No.
Q Someone in Master, you believe, told Captain Hendrickson that Ms. Boyer's husband was out in the hallway?
A Yes.
Q And Mr. Hendrickson then tells you, why don't you go out and talk to him. Or what does Mr. Hendrickson say to you?
A He just asked me to go out, explain the

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situation to her husband, and I said, okay, I will.
Q And what Mr. Hendrickson was doing instead of talking to Mr. Boyer was looking at videos of the incident?
MR. JONES: Objection to form. You can answer.
A He was just trying to get the facts together. What happened.
Q Okay. What do you mean by that? What was he doing?
A Video and talking to us and whatever, whatever it took for him to figure out what happened.
Q Okay. So he was looking at video and he's in Master Control looking at video?
A Yes.
Q He's talking to us. Who is he talking to?
A I don't recall who was in Master Control that night, but he was talking to whoever was in Master Control.
Q Okay. And Master Control is inside of a, kind of a bubble with windows?
A Yes.
Q And that's where you recall Mr. Hendrickson standing when you went out to go speak with Mr.

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Boyer?
A Yes.
Q When you went out to speak with Mr. Boyer, do you remember what you said?
A Yes.
Q What did you tell him?
A I told him there was an incident with his wife. We loaded her on the gurney, took her across. Put her in the ambulance and they were taking her across the street to the hospital and get her stabilized and they were going to helicopter to La Crosse. And for him to go across the street and find out where she was going.
Q Where she was going in the helicopter?
A Yes.
Q How did Mr. Boyer react?
A He stood up with the bag of pills and went out the door. He didn't seem too upset. My recollection was he just got up and went across the street.
Q Did he say anything to you?
A No. I don't recall him saying anything to me, or, if he did, it was, okay, and out the door he went.

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Q Did you ever see Mr. Boyer again after that?
A No.
Q What can you tell me about anything you had to do professionally with Ms. Boyer's -- this event after the event occurred and you sent Mr. Boyer out. I know you wrote this report. Did anything else happen?
MR. JONES: Object to form. Go ahead.
A That was basically it. Sometimes we use our reports for a learning tool, you know. We look back and see how CPR is done, make sure everything was done correct, so we can use it in the future if things were done wrong.
Q Did that happen here?
A No.
Q Did anybody talk to you about what had happened? Anybody in the Sheriff's office talk to you about what had happened with Ms. Boyer?
MR. JONES: Objection to form. Go ahead.
A No. We had a little debriefing afterwards, which is policy. I talked to the staff that was involved, just to make sure everybody was okay, because I just feel like that's part of my job, and everybody was fine with the way

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things went.
Q Debriefing, when did this debriefing occur?
A Within a half an hour to an hour after the incident.
Q Okay. So about the time Captain Hendrickson arrives?
A Yes.
Q Did Captain Hendrickson conduct a debriefing with everybody?
A No.
Q How does the debriefing work? Are you all standing together in a circle? Are you talking to people individually?
A Probably both individually and as a group.
Q I don't want you to speculate. Do you remember how the debriefing went here?
A No, I do not.
Q You said one occurred. Just give me what you do remember about it in terms of how it occurred. The mechanics?
A Basically we ask everybody if, you know, if they are okay with it or if they've got to see the pastor or whatever the case may be. Like I say, I've been involved in several over the years at the Veterans Hospital, so I was fine

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with it. And I just wanted to make sure everybody else was too.
Q What do you mean, you were fine with it?
A Well, you know, I still think about it now and then, but, like I say, I've been there a few times, so I know how it affects people. And we've got a lot of young people, and I just wanted to make sure that they were all right or if they needed to talk to somebody.
Q Was everybody all right?
A Seemed to be, yes.
Q How was Danielle Warren?
A She was a little shaken, but she was fine. I talked to her. She was okay.
Q How was Kyle Moga?
A Kyle was fine.
Q Anybody else? Anybody report any distress to you at all about what had just happened?
MR. JONES: Objection to the form. You can answer.
A No.
Q Do you recall having any discussions after that night -- well, let me back up. Was Captain Hendrickson part of those conversations at all?
A No.

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Q Did you see Captain Hendrickson doing any similar debriefing that you might have not been within earshot of?
A I did not.
MR. JONES: Objection to form.
BY MR. WEIL:
Q After that debriefing, you wrote this report, correct?
A Yes.
Q Did you ever speak with anybody about the incident, besides writing this report?
A No.
Q It was never a topic of conversation at all with any guard at the jail?
MR. JONES: Objection to form. Go ahead.
A Not with me, no.
Q Did you ever learn that Ms. Boyer died?
A Not, no, not for awhile. It might have been a week or so later, because I had a few days off there, so I don't -- somebody might have mentioned that she passed.
Q Okay.
A I don't recall when it was.
Q You recall learning about, that Ms. Boyer died.

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You don't recall exactly when?
A. Yes.
Q. Do you recall that being a topic of conversation at all?
A. No.
Q. Do you live nearby?
A. Tomah.
Q. In Tomah, okay. That's right. So there wouldn't have been a topic of conversation of a helicopter landing in Sparta?
MR. JONES: Objection to form.
BY MR. WEIL:
Q. That you're aware of?
A. No.
Q. And that wasn't a topic of conversation with anybody at the jail?
A. No, not me, no.
Q. Other than writing this report, were you ever approached by any investigator or any supervisor to talk about what had happened?
A. No. I don't recall.
Q. Ever interviewed by anybody in any sort of debrief, beyond the short emotional debrief you talked about earlier?
MR. JONES: Objection to form. Go

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ahead.
A. No.
Q. Did Captain Hendrickson ever talk to you about what you saw?
A. I don't recall.
Q. You don't recall one way or the other?
A. Right.
Q. Did anybody talk to you about this report at all?
A. No. I don't recall.
Q. You weren't typically on the night shift, correct?
A. I believe so.
Q. Did people on the day shift have questions for you about what happened?
A. No.
Q. Was this an out-of-the-ordinary incident at the jail?
A. I don't know.
Q. You were there for several years. Did this strike you as an out-of-the-ordinary incident at the jail?
A. No. No.
Q. Why do you say that?
A. We take all the people that come in seriously,

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medical or suicidal incidents, so we take precautions.
Q. Were medical emergencies like this common at the jail?
A. Yes.
Q. How so?
A. If an inmate has been drinking for three days, they come into the jail, and we monitor them for 24, 48 hours to make sure they are okay.
Q. Was it frequent that the jail would, in your experience, that the jail would be calling paramedics in like it did in this circumstance?
A. Yes.
Q. How often would that occur?
A. Maybe once a month, I suppose. Twice a month at the most.
Q. Again, I'm just trying to get your best recollection. What medical emergencies do you recall inducing those, those call-ins by paramedics?
MR. JONES: Objection to form. You can answer.
A. Mostly people with heart problems. Or unresponsive people. We always take precautions and call EMTs if we are in any

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doubt at all.
Q. So you recall heart problems being a frequent issue for EMTs getting called in?
MR. JONES: Objection to form.
A. Yep. Maybe diabetics, blood sugars, blood pressures, whatever the case may be, we take precautions on all that.
Q. Okay. There is a hospital across the street from the jail, right?
A. Yes.
Q. Did you have a feeling about why paramedics would be getting called in if there was a hospital across the street from the jail?
MR. JONES: Objection, form. Go ahead.
A. That's just the way we do things. Especially when we're short of help. We can't just give a correction officer -- take somebody across the street, because we do not -- then we would be under our numbers and we can't do that.
Q. When an EMT comes in and takes somebody away, does a correctional officer need to go with them?
A. Usually.
Q. So if an EMT comes in and takes a person from

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the jail across the street to the hospital, a guard has to go with them to the hospital, right?
A Correct.
Q So I didn't understand what you were saying about being short of staff.
A Unless we call transport officers in. We have transport officers on call that come in and do that kind of stuff for us.
Q Could a transport officer transport someone to the emergency room?
A Yes.
Q So I'm still not following you. What's the difference?
A I do not believe that we sent anyone across the street that night. I don't recall.
Q I wasn't talking about that night. I'm just talking generally in your experience. You said that EMTs would be called in about once a month, and I'm just trying to get your recollection about the circumstances surrounding that?
A Well, we --
MR. JONES: Objection to form. You can go ahead and answer.

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A If we know --
MR. JONES: What's the question pending?
BY MR. WEIL:
Q So I was trying to understand. The question I had was, I'm just trying to understand. Again, you're there. You're seeing things I'm not, so I'm just trying to understand. When EMTs are getting called in about once a month, did you have a feeling about why they would be getting called in versus taking the person across the street beforehand?
MR. JONES: Objection to form. Go ahead.
A Usually if we know an inmate is going across the street, we will call transport officers in to take them across the street.
Q Okay.
A We have vans that take them across the street. We have transport officers that live right in Sparta that are there within ten minutes.
Q Okay. And the question is, why not just take them across the street as opposed to having EMTs come in? Do you know?
MR. JONES: Objection. Go ahead.

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BY MR. WEIL:
Q I'll back up. My question had to do with, you said EMTs comes into the jail. The question was, we started with, was Ms. Boyer's event extraordinary? I'm not trying to put words in your mouth, but you indicated it wasn't. About once a month we have an event like this where EMTs come into the jail. Did I understand you correctly there?
A Yes.
Q So I was asking what sort of conditions you would see EMTs coming into the jail for. Do you remember me asking that? I can ask this question.
A So what is your question?
Q I had asked you, do you remember -- you told me, I asked what sort of conditions people come into the jail -- induce these EMTs to come into the jail for. I think you mentioned heart problems, diabetics, blood pressure was the three things I wrote down. Is that right?
A Yes. I mean, they would be overdoses, whatever the case may be.
Q And my question is, did you have a sense of why EMTs would be getting called in as opposed to

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just walking the person across the street to the hospital?
A No.
Q Can you recall any particular events where someone was -- an EMT came in for a heart problem?
A No.
Q But you do recall that occurring?
A Yes.
Q About how many times, would you say?
MR. JONES: Over the course of his employment?
BY MR. WEIL:
Q Yes.
A Four, five times, maybe.
Q How about blood pressure? Do you have any estimate?
MR. JONES: Of how many times an EMT came into the jail for that sort of situation?
BY MR. WEIL:
Q Yeah, on your shift?
A In my eight years there, you're asking?
Q Yeah.
A Five or six times, maybe.
Q What other events do you remember EMTs coming

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in for?
A I can't recall of any other ones.
Q Are you familiar with Protocols or Illness Reports that are filled out?
A Yes.
Q And in those Protocols, I'll take the chest pain Protocol. That's the one I'm familiar with, because of this case. Someone will report chest pain, by way of example. That's one of the conditions that you're aware of that you need to fill out a Protocol for, and then you would call the provider or the practitioner to report what's on the Protocol and then follow the practitioner's instructions. Is that generally how the Protocols work?
A It is.
Q Did you recall filling out any of those Protocols for chest pain?
A I did not.
Q Were there Protocols where -- well, do you recall a practitioner instructing you -- let me strike that. Do you recall EMTs, if you know, being called into the jail as a result of filling out a Protocol? Or typically with a protocol, if the Protocol called for medical

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attention, that would result in someone just taking a person across the street?
MR. JONES: Objection to form. You may answer.
A The question again, please.
Q Sure. It was bad a one. I apologize. I'm trying to understand. As I understand the Protocol, it's, you know, where you might be in a situation where, it's, like, maybe I should call 911. The Protocol provides an avenue for getting the medical attention of folks at ACH to make some decisions, right?
A All right.
Q When you call an EMT, when EMTs are coming in, is that typically the result of a 911 call as opposed to going through the Protocol?
MR. JONES: Objection to form, foundation. You can answer.
A Not always, no.
Q Is it often the case?
A No.
Q There are some situations that are so emergent that you're just calling 911, right? You're not filling out the Protocol?
A Correct.

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Q And in those situations, that's when the EMTs are coming in and you're not, you know, waiting around trying to figure out whether or not to send the person to the hospital, right?
A Correct.
Q Are you aware of situations where the practitioner would say, call EMTs as opposed to send the person to the ER, which is across the street?
A I am not aware of that. No, I'm not.
Q Is it your understanding that most of those times that we're talking about here then with EMTs coming in would be from a guard just saying, I've got to call 911. I can't wait for the Protocol?
MR. JONES: Objection to form, foundation. You can answer.
A Sometimes.
Q How often would you say?
A I guess it's our discretion, you know.
MR. JONES: He's asking you how often that happened.
A Not very often.
Q When you say it's your discretion, what do you mean?

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A I guess it comes with experience again.
Q Did you receive any instruction about when to fill out an Illness Report or a Protocol as opposed to just calling 911?
A We always do that, Protocols.
Q Why is that?
A We fill out our Protocols. We call the nurse practitioner and she tells us what we should do -- if they should be taken across the street or get some meds for that person or whatever the case may be.
MR. WEIL: Okay. Mr. Schwanz, thank you. That's all I have at this time.
MR. KNOTT: Sir, I have just one topic I want to follow up on. My name is Doug Knott and I represent Advanced Correctional, Amber Fennigkoh and Lisa Pisney.
BY MR. KNOTT:
Q You said that, that when you went to see Mr. Boyer, he had a bag of medications?
A Yes.
Q Can you describe what the bag was like? Was it a grocery bag?
A It was a big-sized Baggie, like a zip-top.
Q You're gesturing with your hands?

A One of the bigger bag you can purchase.
Q You're gesturing like about a square foot wide?
A Yeah, probably like a --
MR. JONES: Just like before. You have to wait for him to finish his question.
BY MR. KNOTT:
Q Yes, just so we can record what you're showing with your hands. I was just saying, are you -- you're kind of describing with your hands a square, like a foot wide? Is that fair?
A Yes.
Q Okay. So it was clear, correct?
A Yes.
Q And do you remember, were there loose pills in there or do you remember if there were pill bottles?
A I recall several pill bottles in there.
Q Okay. But you didn't have a conversation with him about what those were or anything?
A I did not.
MR. KNOTT: Okay. Fair enough. Thank you, sir.
MR. JONES: Anything, Mark?
MR. HARDY: No questions.
MR. JONES: Any follow-up?

MR. WEIL: No follow-up.
MR. JONES: No questions. He'll read and sign.
MR. WEIL: Thanks very much, Mr. Schwanz.
THE WITNESS: You're welcome.
(Deposition concluded at 1:32 p.m.)

STATE OF WISCONSIN)
: ss CERTIFICATE
COUNTY OF LACROSSE)

I hereby certify that I reported the deposition of JEFFREY SCHWANZ on the 3rd day of November, 2023, in Sparta, Wisconsin, and that the witness was by me first duly sworn to tell the whole truth; that the testimony was transcribed under my direction and is a true and complete record, to the best of my ability, of the testimony of the witness;

That the cost of the original has been charged to the party who noticed the deposition, and that all parties who ordered such copies have been charged at the same rate for such copies;

That I am not a relative or employee or attorney or counsel of the parties or a relative or employee of such attorney or counsel; that I am not financially interested in the action and have no contract with the parties, attorneys or persons with an interest in the action that affects or has a substantial tendency to affect my impartiality.

WITNESS MY HAND AND SEAL THIS 7TH DAY OF NOVEMBER, 2023.

_____
Nancy Johnson
Registered Professional Reporter
P.O. Box 21
La Crosse, Wisconsin, 54601-0021

My Commission Expires
July 15, 2025

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